Fill in this information to identify the case:						
United States Bankruptcy Court for the:						
District of(State)						
Case number (If known):	Chapter					

## **FILED - WAWB** MAY 15 2025 9:13 AM Gina Zadra Walton, Clerk of Court

☐ Check if this is an amended filing

## Official Form 201

## Voluntary Petition for Non-Individuals Filing for Bankruptcy

12/15

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If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, Instructions for Bankruptcy Forms for Non-Individuals, is available.

1.	Debtor's name	Day Surgery Con	npanions Services			
2.	All other names debtor used in the last 8 years Include any assumed names, trade names, and doing business as names	L. Lee Cobb Interiors Renovetions				
3.	Debtor's federal Employer Identification Number (EIN)	82-2151184				
4.	Debtor's address	Principal place of business  1743 Seward Purk Municipal Street  Seattle Wn 9818 City State ZIP Code	Mailing address, if different from principal place of business  Location of principal assets, if different from principal place of business  Number Street  City State ZIP Code  Location of principal assets, if different from principal place of business			
	Debtor's website (URL)  Type of debtor	Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))  Partnership (excluding LLP)  Other. Specify:				
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10. Are any bankruptcy cases pending or being filed by a business partner or an

List all cases. If more than 1, attach a separate list.

MM / DD / YYYY

Relationship

affiliate of the debtor?

🔯 No

☐ Yes. Debtor

District

Case number, if known

MM / DD / YYYY

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separate list.

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<ol> <li>Why is the case filed in this</li> </ol>	Check all that apply:			
district?	Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.  A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.			
2. Does the debtor own or have possession of any real property or personal property that needs immediate			ntion. Attach additional sheets if needed.	
attention?	_	perty need immediate attention? (Che		
		lleged to pose a threat of imminent and i zard?	dentifiable hazard to public health or safe	
		physically secured or protected from the		
	☐ It includes peri	shable goods or assets that could quickl xample, livestock, seasonal goods, mea	y deteriorate or lose value without	
		options).		
	Where is the prop	perty? Number Street		
		Number Street		
		City	State ZIP Code	
	Is the property in	sured?		
	☐ No			
	Yes. Insurance a		nc Co. # 40553	
	Contact na	me <u>customer</u> se	14166	
	Phone	866-372-89	03	
	T Helle			
Statistical and adminis				
Debtor's estimation of				
	trative information  Check one:  Funds will be available to	or distribution to unsecured creditors. expenses are paid, no funds will be ava	ilable for distribution to unsecured credito	
Debtor's estimation of	Check one:  After any administrative	expenses are paid, no funds will be ava	25,001-50,000	
Debtor's estimation of available funds	Check one:  After any administrative	expenses are paid, no funds will be ava		

Debtor Day Surser	y Companion	Servic Case number (if kn	own)
16. Estimated liabilities	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	□ \$500,000,001-\$1 billion □ \$1,000,000,001-\$10 billion □ \$10,000,000,001-\$50 billion □ More than \$50 billion
Request for Relief, Dec	laration, and Signatures		
WARNING Bankruptcy fraud is a ser \$500,000 or imprisonment	rious crime. Making a false stant for up to 20 years, or both.	atement in connection with a bankrupto 18 U.S.C. §§ 152, 1341, 1519, and 357	y case can result in fines up to 71.
17. Declaration and signature of authorized representative of debtor	The debtor requests relipetition.	ef in accordance with the chapter of title	e 11, United States Code, specified in this
	I have been authorized to	to file this petition on behalf of the debto	or.
	I have examined the info	ormation in this petition and have a reas	sonable belief that the information is true and
ž	I declare under penalty of pe	erjury that the foregoing is true and corr	rect.
	Executed on DS 14 MM / DD /	2025 - (ren _ 1.	Lee Cooper
18. Signature of attorney	Signature of attorney for de	Date	MM /DD /YYYY
	Printed name		
	Firm name	, B	
	Number Street		
	City	Stat	e ZIP Code
	Contact phone	Ema	ail address
	Bar number	Stat	e
	теринун мененин менени Солот байтын мененин м		

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Cryditors

Select Portfolio Servicing IMC.
3217 S. Decker Lake Dr.
Salt Lake City, UT 84119
Acct. 0016156432
Lerre Lee Cooper

Square processors ACCT. Day Surgery Companions. com